

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL099011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/08/2015
NAME OF PROVIDER OR SUPPLIER THE MAGNOLIAS OVER YADKIN		STREET ADDRESS, CITY, STATE, ZIP CODE 144 NORTH LEE AVENUE YADKINVILLE, NC 27055		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This report is of a Biennial Construction Survey done by Bob Getchell on April 8, 2015. Information gathered from the DHSR Master Facility File indicates that this facility was first licensed or submitted 4-16-2001 for a capacity of 20. Based on this information the facility was surveyed for conformance with the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 North Carolina State Building Code for Institutional Unrestrained Occupancies. Deficiencies were noted which will require a new plan of correction.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on observation, the current fire and sanitation reports were not available at the time of the survey. Findings include The following reports were not available at the time of the survey: a) Fire Marshalls Report, b) Fire Alarm Panel Annual Test Report.	C 111		
C 133	Bathrooms-Hand Grips	C 133		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 133	Continued From page 1 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner because a grab bar is coming loose from the bathroom wall. This would effect all residents using the bathroom by exposing them to a fall hazard. Findings include: Room 901 has a grab bar coming loose from the wall at the toilet. Secure.	C 133		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, egress from all areas was not maintained in a safe manner by having loose floor tiles. This would effect all residents by presenting a tripping hazard. Findings include:	C 166		

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C 166	Continued From page 2 a. Room 905 has loose tile in the bathroom	C 166		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings include: a. The attic smoke barrier wall over room 903 has unprotected penetrations by two 2" PVC pipes, and cable which are not protected. NOTE: PVC pipe over 2 inches in diameter require a 'fire collar' or similar system for protection. b. The 1-hour fire resistance rated ceiling over panel PA in the switchgear room was penetrated by 4" PVC pipe which are not protected. NOTE: PVC pipes over 2 inches in diameter require a 'fire collar' or similar system for protection.	C 189		

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C 189	<p>Continued From page 3</p> <p>c. The private laundry room has a ceiling joint that is separating,</p> <p>d. The Med room has a wall/ceiling joint that is separating,</p> <p>These unprotected openings are not in conformance with the requirement to use a through penetration fire stop system that has been tested in accordance with ASTM E-814.</p> <p>2. Based on observation, the building exit signage was not maintained in a safe manner. This would effect all residents by not keeping the exits visible in an emergency.</p> <p>Findings include: Exit signs are not working in the following locations:</p> <p>a) Exit sign at end of corridor has the bulbs burned out of it.</p> <p>b) Exit sign at the Nurses Station is not working on battery backup.</p> <p>3. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would effect all residents by not detecting smoke and activating the fire alarm, or blocking sprinkler coverage.</p> <p>Findings include: a. The sample tubes for the HVAC duct mounted smoke detectors were dirty in all the HVAC unit mechanical rooms.</p> <p>b. Some of the sprinkler heads in the attic are covered with insulation.</p>	C 189		